

### **The Heimlich Maneuver**

More than 3,000 people die from choking in the United States each year. Most adults choke while eating. Meat is the usual culprit. Other foods and objects can cause choking too, especially in young children, who routinely put a variety of things into their mouths.

For years, medical opinion differed on the best way or ways of dislodging an object from the back throat of a choking victim. Sharp blows to the back, finger sweeps of the throat, and manual thrusts to the chest were methods that were often recommended. However, at a conference held July 11–13, 1985, to establish first-aid standards for the American Red Cross and the American Heart Association, the participants concluded that methods other than the Heimlich Maneuver can be dangerous and that only the Heimlich Maneuver should be used to treat a choking victim.

Millions of Americans have been taught to treat persons whose airways are obstructed by a foreign body by administering back blows, chest thrusts, and abdominal thrusts. Now they must be advised that these methods are hazardous, even lethal. A back slap can drive a foreign object even deeper into the throat. Chest and abdominal thrusts, because they refer to blows to unspecified locations on the body, have resulted in cracked ribs and damaged spleens and livers, among other injuries.

The single exception to the prohibition against the backslap is the child under 1 year. The back blow should be administered with the baby held upside down.

The best rescue technique in any choking situation is the Heimlich Maneuver. I urge the American Red Cross, the American Heart Association, and all those who teach first aid to teach only the Heimlich Maneuver. Manuals, posters, and other materials that recommend treating choking victims with slaps and chest thrusts should be withdrawn from circulation.

Devised in the early 1970s by Henry J. Heimlich, MD, who is now president of the Heimlich Institute at Xavier University, the Heimlich Maneuver depends for its success on the fact that a choking

victim has a large volume of air in his lungs, even if he was exhaling when the choking began. If a rescuer presses sharply and repeatedly on the victim's abdomen, with one balled fist wrapped in the opposite hand, at a point just above the navel, but below the rib cage and the diaphragm, that reservoir of air is expelled up the airway with a great deal of force, thus dislodging the obstruction from the victim's throat.

The Heimlich Maneuver is safe, effective, and easily mastered by the average person. It can be performed on standing or seated victims and on persons who have fallen to the floor. It can be performed on children and even on oneself. Those who wish to learn when and how to perform the Heimlich Maneuver should contact their local Red Cross or Heart Association chapter for expert instruction.

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Surgeon General

### **The Possible Dream: Accident Prevention and Injury Control—a Conference to Chart Advances and Plan Strategy**

A major shift in the causes of death and disability has occurred in this country. At the turn of the century, infectious diseases were the prime cause of early death. Today, injuries are the prime cause—yet they remain one of the nation's most neglected public health problems.

The enormous magnitude of the injury problem recently has been the subject of a joint review by the National Research Council and the Institute of Medicine (1). Each year, more than 140,000 Americans die from injuries. More citizens aged 1–34 years die from injuries than from all diseases combined, and injuries are the leading cause of death up to age 44. Injuries also cause the loss of more working years of life than all forms of cancer and heart disease combined (2).

It should be pointed out that, although injury mortality is striking and important, it represents only the very tip of the iceberg where the injury problem is concerned. Nearly one person in three